



## Arkansas Early Childhood Comprehensive Systems Initiative

### Family Support Work Group

**Family Support Work Group - December 14, 2004 - 9 a.m. - 11 a.m.**

**Members Present:** James Abson, Sherrill Archer, Deborah Gangluff, Dana Gonzales, Jackie Gorton, Vivian Jackson, Kenneth Myers, Martha Reeder, Kathy Robinson, Sorita Rusher, Kathleen Stafford, Paula C. Watson, Brazier Watts, and Lorie Williams. Also Gil Buchanan from the Medical Home Work Group. **Regrets:** Kathie Molina.

**Jackie welcomed members and self-introductions were made by those present.**

#### **Agenda Item #1: Strengthening Families Initiative State Pilot Project**

**Discussion:** Jackie and Martha discussed the **Strengthening Families Initiative** (which addresses child abuse and neglect prevention through intervening in early child care settings). Since the last meeting of this group, Martha completed a proposal for a technical assistance grant on behalf of a **partnership** representing the AECCS and other stakeholders.

The Center for the Study of Social Policy from the Doris Duke foundation has a grant program called, **Strengthening Families through Early Care and Education**. A lot of their parameters coincide with the AECCS effort. This idea is to address child abuse and neglect through child care facilities. The program addresses five factors that research reports strengthen families. They are:

- Parental resilience
- Social connections
- Knowledge of parenting and child development
- Concrete support in times of need
- Social and emotional competence of children

There is a strong connection with the grant and what the AECCS system is doing.

The partnership asked the Center to provide technical assistance in a specific area. They asked for help in developing a tool based on the domains on which we are focusing. This tool will work on family map factors and activities that will track back to one of these indicators.

**Result:** Arkansas is one of seven states out of a total of 28 states, that were chosen to meet with the grantor in Albuquerque, New Mexico, on December 1-3. On behalf of the partnership, Jackie Gorton and Sherry Jo McLemore went to Albuquerque to meet with the grantor. Following the meeting in Albuquerque, supplemental materials were submitted by Friday, December 17.

Originally, only three states were to be chosen as part of the pilot project, but it appears now that all seven states may be selected to participate in the initiative to receive technical assistance and research support. A decision will be made by the first week in January.

If Arkansas is selected, this will provide support for the Family Support Work Group's goal to develop the Tool Kit. When Family Supports meets again on January 11, there should be an answer related to this.

Since the tool kit is to focus on critical pieces, this is an opportunity to get technical assistance to help narrow down the focus. The tool should be research and best-practices based.

Martha shared the **DHS/DCCECE Framework Chart**. She would like to see something like this based on the five protective factors when the work is completed. The tool should have a purpose, not be just a collection of ideas.

**Agenda Item #2: Organizational Mapping of Arkansas Initiative and Projects - S. Archer**

**Discussion:** Sherrill Archer presented the **Family Assessment** collection form data for four organizations, each with a different type of family assessment plan. All the items gather information of the family. In all cases, the family helps to complete the forms.

**Document #1.** AR Department of Education, Special Education, Early Childhood Program. (Provides for a Social History. Information on family resources, child focused,

**Document #2.** AR Department of Human Services, Division of Children and Family. Case plan. Interventions based on needs of the family. What are the actions taken to assist the family/foster parents? The child care provider is not involved in developing the case plan. On a whole, foster children are not enrolled in childcare. Of those who are, most of the caregivers are not included in the case plan. One thing looked at: Who is the Father of child and relationship to each other. It asks the question whether ADA accommodations are needed. It has a lot of the information that is needed when you assess a family. There is some negative language in the form.

**Document #3.** Head Start. Family Needs Assessment Family is rated based on a variety of factors. This gets at the family first before addressing the individual child. They always have a family need assessment that gives a rating. The family and the worker rate together. They look at different categories and give rating that tailors their intervention based on situation of the family. The gets the family first before becoming child specific. This form is already in use by Head Start, who does a reassessment/update on a quarterly basis.

**Document #4** First Connections, Infant and Toddler Program. Individual Family Service Plan (IFSP). They do not have a formal assessment tool. The state elected instead to use the IFSP. IFSP identifies family priorities, resources, and concerns. Assistance is related to the needs to help the child. First Connection uses a second document--DDS Needs Assessment--This is child focused. {Sherrill was unable to obtain a copy of the Health Department Assessment Form. }

(next column)

Sherrill stated that these are the basic family assessment types in Arkansas.

There are some very good nationwide assessment forms. You just have to search for them. The search can probably completed using the web.

Martha stated that Patti Bokony is coordinating the development of Brief Parenting Interventions (part of the Family Foundation Project) with the Family Map project (development of a family pre-screening and assessment tool to be developed by Drs. Bob Bradley and Leanne Whiteside-Mansell). The domains in the Family Map are: Sustenance/Safety, Stimulation, Support, Structure, Surveillance, Social Integration, Parenting Control Style, Family Conflict/Violence, Social Support, Family Cohesion, Substance Abuse, and Psychological Disorders/Depression.

Patti will organize the Brief Parenting Interventions (to be developed and delivered initially by Head Start/Early Head Start staff) to match so that by the end of the grants, there will be a family screening/ assessment tool that will refer staff to brief parenting interventions based on families' needs.

---

**Tasks:** Sherrill will do a national level search and provide information/report back at the next meeting.

**(Note: If anyone wants a copy of the documents, contact the office and a copy will be sent to you through the mail. This is too bulky to include in the minutes.)**

## Family Support Work Group

Date: December 14, 2004

Page: 3

### Agenda Item #3: Logic Model – Revisit and Update the Short-Term Outcomes/Activities

**Discussion:** The logic model was reviewed to make changes and adjustments and suggestions as desired.

A discussion was held about other groups desiring to develop a "toolkit" and how do we link these rather than recreate.

Sherrill recently attended a meeting at the School for the Deaf. They are looking at developing a Family Resource Guide. She mentioned to them that their information could be included in what this group is doing. There needs to be a way of pulling all information together in one spot.

Martha suggested a web site with a one-page synopsis about each group telling what people could find there. Also, there would be links to other sites.

Question: What about each group offering training?  
Suggested that there be a calendar where events could be listed. There are funds to make this happen.

Question: How do you get the information out there?  
We need to address this challenge with an action plan.

Question: What if people do not have access to a computer? Child referral network telephone line could be used.

We could train child care licensing when they are out how to access the web site. Food sponsors could also be shown. We will need to let people know it is there and how to use it. This group is interested in folks having access to what they use. If we use the ARMIS site we will need to be sure that people have access to it. Information must be current and updated often. Every person around the table could take responsibility to enlist agencies/entities that need to be listed.

(next column)

Martha stated that everyone seems to be coming around to the same point of view: targeting child care providers as the best hope to help families.

Martha reported that the Early Care and Education Work Group's tier system model has a block called Parent/Family/Community Support. They are looking to the Family Support group for concrete, realistic ways for this to happen. It was reported that only nine states have a tiered quality program including Family Support. We need to look at the lessons learned. If Arkansas can include family support in the Tiered Quality Strategy, we will be way ahead of other states. This will make childcare providers' job easier.

The Medical Home group had a health coordinator to help the family, hold their hands, and grow into the process.

Gil Buchanan reported that there is a guide called, "You Are Not Alone"—it is a family resource tool, but it is supported by the Medical Home group. It helps families determine who to call, how to connect, or what do you do. See Medical Home web site:  
[www.medicalhomeear.org](http://www.medicalhomeear.org).

Other discussion: If every family that came into the office, the worker had to review with the family a checklist of available resources for the family, how helpful would this be? We need to educate parents enough for them to know how to ask for what they need. A Medicaid tool has been developed to help parents decide what they need. The simpler you can make the information sharing the better.

Several different kinds of training may be needed. It would not have to be an intensive training. May be just laying the information on the table at meetings and teach how to use. There needs to be a universal training program, not from one perspective but from a broader perspective, in order for everyone (service providers, caregivers, etc.) across the state to receive the same level of training and information. There is a need to compile a lists of resources and trainings that are currently available.

**Family Support Work Group**

**Date: December 14, 2004**

**Page: 4**

**Agenda Item #3 Continued: Logic Model – Revisit and Update the Short-Term Outcomes/Activities**

**Discussion:** Each individual short-term outcome was reviewed. Definition needed for a “thriving” family. A definition of self-sufficiency was discussed, but no decision was reached. The relationship between self-sufficiency vs. resiliency and correlations between the two was discussed. From DHS standpoint, self-sufficiency means that the family is no longer eligible for public assistance.

Self-sufficiency may have different meanings to each parent and each provider and each agency. Everyone is different where they fall on the scale. If we pry too much into parent’s business, they automatically object.

Dana Gonzales shared information about the state of Utah project— the “Universal Application System.” This is a family screening process that the family inputs their information (without individual identifying information - HIPPA compliant) into a computer and the system will display a menu of services that family members are eligible to receive. This is called, “Generic Eligibility.” Jackie remarked that this allows the family to take advantage and find out what is available for them. Links to applications are available at the site:

[www.utahclicks.org](http://www.utahclicks.org)

Gil asked the question, “Would it be a reasonable activity to select major items and explain in a simplified way?”

Martha reported that Sharon Kagan at Columbia University is working with three states (Oklahoma, Colorado, and Mississippi) doing a policy audit related to Early Childhood. They are looking at Laws and Statutes on the books. They have said that there are policies on the books that were not really policies. Some barriers: Things they thoughts were laws, were not laws at all. Just the opposite happened. Some things they thought were on the books were not. It was noted that Columbia University is one of the few schools that has a Public Policy Program related to Early Childhood. The University is not soliciting any new states to participate in the program at this time.

(next column)

Other discussion: Families of all types are involved at all levels of decision making including boards, committees, meetings, etc. Right now there are two levels of quality. The tier system is allows for a negotiable pathway—from basic licensing compliance to real quality. There are 14,000 children registered in the ABC Program and 10,000 enrolled in Head Start. These programs are at a quality level already.

Martha stated that the schools in Arkansas doing the best job relating to parents are “Schools of the 21<sup>st</sup> Century. They are doing the best job of incorporating Family Support. They have technical assistance from Yale University in New Haven, Connecticut.

She also reported on a legislative meeting she attended on ACT 603. The money has been allotted to the schools and school boards should hold the superintendents to this (for facilitating ACT 603), but it does not require that they hire a person whose main job is to handle this responsibility. Usually, this means that existing staff personnel are assigned this as an additional task.

Susan mentioned that every school district is handling ACT 603 differently. Some schools do not have space for the Parent Resource Center. Some schools have and use social workers. (This is anther group of folks that need training.)

Gil suggested that maybe there should be a “carrot” as an incentive to get parents to buy into the program.

---

**Result:** It was suggested that information be pulled from the Head Start assessment, Family Strength and Health Section.

There is a need to explore the Utah System. We need someone knowledgeable about computers to talk to the people in Utah.

**Family Support Work Group**

**Date:** December 14, 2004

**Page:** 5

**Agenda Item #3 Continued: Logic Model - Revisit and Update the Short-Term Outcomes/Activities**

**TASKS:** Each person is to look at the Utah web site before the next meeting in order to discuss further: [www.utahclicks.org](http://www.utahclicks.org). Each person should answer the question: "How could it benefit our clients and those we want to reach?"

Dana agreed to talk with someone who can tell us what questions to ask of the people in Utah.

**Agenda Item #4: Sub Work Groups**

**Discussion:** Various sub-group are needed to work around certain tasks.

**Toolkit.** This sub-group will also include persons from other work groups. Gil Buchanan will represent the Medical Home Work Group and Patti Bokony will represent the Social-Emotional Health Work Group.  
(next column)

**ARMIS.** Susan and Brazier volunteered to identify those participants on the ARMIS (Arkansas Management Information System) system and any missing agencies/organization; what the system is and can offer to the Family Support Work Group:

- What is needed?
- ARMIS missing pieces?
- How do we get there?

(next column)

**Results:**

The small sub-group will be pulled together after January 5, 2005.

They will bring hard copies of their findings to the next meeting.

**Agenda Item #5: Adjournment and Next Meeting Date**

**Discussion:** There being no further business, the meeting was adjourned.

**Result: Next Meeting Date—**

**Date:** January 11, 2004

**Time:** 9 - 11 a.m.

**Place:** Freeway Medical Center  
5800 West 10<sup>th</sup> Street - Little Rock

**Additional Agenda Items:**

- Revisit and Update the "short-term outcomes and activities.
- Other avenues - to address and support the short-term outcomes in order to achieve the one identified long-term outcome.
- Revisit the strengths each Family Support Work Group members brings to the group and how these roles will be utilized to obtain the long-term outcome.